

David G. Collins (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 2 5 2017

NEW HAMPSHIRE ATE

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|--|--|--|--|--|---|----------------|
| I. Name of Lobb | vist(s) David Co | ollins, Gina | Powers, Glenı | | | |
| • | | | Davi | d McKillo | p | |
| II. Name of lobby | yist's partnership, | firm or corporation, if | iany: | | | |
| Rath, Youn | ng and Pigna | telli, P.C. | | | | |
| | (Name of partnership, | | | | | |
| One Capita | al Plaza | Cond | cord N | ΙΉ | 0330 | 1 |
| Business Address: | | (Town/City) | (S | tate) | (Zip Code) | |
| 603 226- | 2600 | (603) 226-27 | 00 e-mail | dgc@rathl | aw.com | |
| (Telepho | 2600 one) | | ax) | | | |
| eportable expen | se transactions wh | one – file separate rep ich are not attributabl | le to any one client). | | | 011101 |
| • | | ing in the months prior leum Institut | | elative to the folic | owing chent: | |
| | | Client as it appears on the | | orm) | | |
| OR | (- 2000) | - · · · · · · · · · · · · · · · · · · · | | • | | |
| All reportable inrelated to any p | | lobbyist (including the l | | | listed below wi | nich are |
| V. Date of Repo | | 17 🗌 registration to 3/31/17 | July 26, 20 activity from 4/1/1 | | | |
| | | | Tompome 2 | , 2018 🗌 | | |
| | October 25, | 2017 L X | | | | |
| | October 25, activity from 7/1. | | activity from 10/1 | | | |
| f this box is chec | activity from 7/1, been no fees recei ked, complete just th | | activity from 10/1 | /17 to 12/31/17 de since the las | st report. □ House, Room 20 | • |
| If this box is chec Concord, NH 033 VI. Check if add | activity from 7/1, been no fees recei ked, complete just th 301. iitional reports are | /17 to 9/30/17 ived and no reportation is form and submit it to attached: | activity from 10/1 ble transactions ma b the Secretary of State | /17 to 12/31/17 de since the las | łouse, Room 20 | • |
| If this box is chec Concord, NH 033 VI. Check if add X If you have re | activity from 7/1. been no fees received, complete just the 101. litional reports are eceived fees or made | /17 to 9/30/17 ived and no reportation is form and submit it to attached: e expenditures, you must | activity from 10/1 ble transactions ma b the Secretary of State st file Addendum A— | /17 to 12/31/17 de since the last 's Office, State F | łouse, Room 20 es | 4, |
| If this box is chec Concord, NH 033 VI. Check if add X If you have re If you have p Expense Reimbur | activity from 7/1, been no fees received, complete just the 1801. Stitional reports are eccived fees or made and an honorarium or sement | ived and no reportations form and submit it to attached: e expenditures, you must reimbursed expenses, | activity from 10/1 ble transactions ma o the Secretary of State st file Addendum A— you must file Addend | de since the last 's Office, State Frees and Expense turn B-Report o | House, Room 20 es of Honorariums | or |
| If this box is chec Concord, NH 033 VI. Check if add X If you have re I If you have p Expense Reimbur | activity from 7/1, been no fees received, complete just the 1801. Stitional reports are eccived fees or made and an honorarium or sement | /17 to 9/30/17 ived and no reportation is form and submit it to attached: e expenditures, you must | activity from 10/1 ble transactions ma o the Secretary of State st file Addendum A— you must file Addend | de since the last 's Office, State Frees and Expense turn B-Report o | House, Room 20 es of Honorariums | or |
| If this box is chec Concord, NH 033 VI. Check if add X If you have positive in the control If you, your for the control in the | activity from 7/1. been no fees received, complete just the 10/1. iitional reports are eccived fees or made and an honorarium or sement firm, or your family | ived and no reportations form and submit it to attached: e expenditures, you must reimbursed expenses, has made political control obbyist 14-C and RSA 664 and | activity from 10/1 ble transactions may the Secretary of State st file Addendum A— you must file Addend | de since the last s's Office, State H. Fees and Expense dum B. Report of the Addendum C. | House, Room 20 es f Honorariums - Political Contr | or ibutions |
| If this box is chec Concord, NH 033 VI. Check if add X If you have re If you have p Expense Reimbur If you, your f Sworn Statemen I have read RSA | activity from 7/L. been no fees received, complete just the 1801. iitional reports are ecceived fees or made aid an honorarium or rement firm, or your family at/Affirmation by L. 15, RSA 15-B, RSA | ived and no reportations form and submit it to attached: e expenditures, you must reimbursed expenses, has made political control obbyist 14-C and RSA 664 and | activity from 10/1 ble transactions may the Secretary of State st file Addendum A— you must file Addend ributions, you must file d hereby swear or affin | de since the last s's Office, State H. Fees and Expense dum B. Report of the Addendum C. | House, Room 20 es f Honorariums - Political Contr | or ibutions |

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) David Collins/Gina Powers/Glenn Wallace/I | Richard Parsons/David McKillop |
|---|--|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| Rath Young and Pignatelli, P.C. (Name of partnership, firm or corporation) | |
| III. Name of Client American Petroleum Institute | DateOctober 25, 2017 |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, or public relations services |
| a) Total of all fees received in this reporting period | a) \$ <u>12,275.96</u> |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year). | b) \$ <u>24,944.25</u> ear) |
| c) Total of all fees received to date (Add lines a and b) | c) \$37,220.21 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business so than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$12,275.76 |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$0 |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$0 |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$12,275.76 |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$24,944.25 |
| f) Total of all expenses year to date | f) \$37,220.21 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | n that the foregoing information |
| Des COO | October 25, 2017 |
| (Signature of lobbyist) | (Date) |
| David G. Collins (Print Name of lobbyist) | |